

IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF MISSISSIPPI

IN RE:
PIONEER HEALTH SERVICES, INC.¹
DEBTOR

NO. 16-01119-NPO
CHAPTER 11

REPORT OF SALE OF SUBSTANTIALLY ALL
OF THE ASSETS OF PIONEER HEALTH SERVICES OF ONEIDA, LLC

COMES NOW Pioneer Health Services, Inc. (the “Debtor” or the “Seller”) and files this, its *Report of Sale of Substantially All of the Assets Owned by Pioneer Health Services of Oneida, LLC (16-01124-NPO)* (the “Report”), and in support thereof would respectfully show as follows, to-wit:

1. Debtor attaches hereto as Exhibit “A” and incorporates herein by reference the “Purchaser’s Final Statement” issued by Fidelity National Title Insurance Company.
2. Debtor attaches hereto as Exhibit “B” and incorporates herein by reference the “Seller’s Final Statement” issued by Fidelity National Title Insurance Company.
3. The sale of the assets of Pioneer Health Services of Oneida, LLC has been completed, the supporting documents have been forwarded to the appropriate offices for recording, and the funds have been disbursed as required by the Court in the Sale Order dated December 23, 2016, and entered in the Court’s records as Docket Number 1537.

¹ On April 6, 2016, the bankruptcy cases of *Pioneer Health Services of Patrick County, Inc.*, No. 16-01120-NPO; *Pioneer Health Services of Newton County, LLC*, No. 16-01121-NPO; *Pioneer Health Services of Stokes County, Inc.*, No. 16-01122-NPO; *Pioneer Health Services of Choctaw County, LLC*, No. 16-01123-NPO; *Pioneer Health Services of Oneida, LLC*, No. 16-01124-NPO; and *Pioneer Health Services of Monroe County, Inc.*, No. 16-01125-NPO were administratively consolidated into the bankruptcy case of *Pioneer Health Services, Inc.*, No. 16-01119-NPO. Debtor *Pioneer Health Services of Early County, LLC*, No. 16-01243-NPO, filed its Chapter 11 bankruptcy case on April 8, 2016, and was administratively consolidated into the “main” case of *Pioneer Health Services, Inc.*, No. 16-01119-NPO, on April 15, 2016. Debtor *Medicomp, Inc.*, No. 16-01126, filed its Chapter 11 bankruptcy case on March 30, 2016, and was administratively consolidated into the “main” case of *Pioneer Health Services, Inc.*, No. 16-01119-NPO, on June 29, 2016. All of these cases are hereinafter referred to collectively as “the Debtor”.

4. The funds received by the Debtor of \$13,000, \$274,868 and \$199,600 remain in Debtor's counsel's trust account. The \$15,000 transfer will be paid to Siemens Financial Services, Inc., and then the remaining funds will be placed in a segregated, interest-bearing savings account established pursuant to guidelines promulgated by the Office of the United States Trustee, under the control of Debtor's counsel. Other than the payment to Siemens Financial Services, Inc., no other funds shall be disbursed except upon entry of a court order authorizing the disbursements, and then only after notice and a hearing.

DATED, this the 20th day of January, 2017.

Respectfully submitted,

PIONEER HEALTH SERVICES, INC.

By Its Attorneys,

LAW OFFICES OF CRAIG M. GENO, PLLC

By: 

Craig M. Geno

OF COUNSEL:

Craig M. Geno; MSB No. 4793
 Jarret P. Nichols; MSB No. 99426
 LAW OFFICES OF CRAIG M. GENO, PLLC
 587 Highland Colony Parkway
 Ridgeland, MS 39157
 601-427-0048 - Telephone
 601-427-0050 - Facsimile
cmgeno@cmgenolaw.com
jnichols@cmgenolaw.com

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CERTIFICATE OF SERVICE

I, Craig M. Geno, do hereby certify that I have caused to be served this date, via electronic filing transmission, a true and correct copy of the above and foregoing to all creditors and parties in interest, all creditors of PHS Oneida, and to the following:

Ronald H. McAlpin, Esq.
ronald.mcalpin@usdoj.gov

Darryl S. Laddin, Esq.
dladdin@agg.com

Christopher J. Steiskal, Esq.
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William H. Leech, Esq.
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Rennova Health, Inc.
c/o Paul Jennings, Esq.
Pjennings@bassberry.com

THIS, the 20th of January, 2017.



Craig M. Geno



Fidelity National Title
Insurance Company

Fidelity National Title Insurance Company

6840 Carothers Parkway, Suite 200
Franklin, TN 37067
Phone: 615-224-7400

PURCHASER'S FINAL STATEMENT

SETTLEMENT DATE: January 13, 2017

ORDER NO.: 1616133CTN

PURCHASER: Scott County Community Hospital, Inc., a
Tennessee corporation
18797 Alberta Street
Oneida, TN 37841

SELLER: Pioneer Health Services of Oneida, LLC, a
Mississippi limited liability company
110 Pioneer Way
Magee, MS 39111

Pioneer Health Services of Oneida Real Estate,
LLC, a Mississippi limited liability company
100 Pioneer Way
Magee, MS 39111

PROPERTY: 18797 Alberta Street
Oneida, TN 37841-2127

Purchase Price (Real Estate)	\$398,000.00
Purchase Price (Hospital)	\$600,000.00
Total Purchase Price	\$998,000.00
Plus: Charges	
2016 County Taxes to Scott County Trustee	\$11,122.63
2015 County Taxes good through January 2017 to Scott County Trustee	\$12,957.86
2016 County Personal Property Taxes to Scott County Trustee	\$8,248.92
2015 County Personal Property Taxes good through January 2017 to Scott County Trustee	\$7,688.01
2016 City Taxes good through January 2017 to City of Oneida Property Tax Department	\$4,320.00
2015 City Taxes good through January 2017 to City of Oneida Property Tax Department	\$5,040.00
2016 City Personal Property Taxes good through January 2017 to City of Oneida Property Tax Department	\$3,204.36
2015 City Personal Property Taxes good through January 2017 to City of Oneida Property Tax Department	\$2,989.98
Survey Fees to MKAssociates, Inc.	\$5,450.00
Filing Fees to Scott County Register	\$3,892.33
Warranty Deed	\$50.00
Transfer Tax on \$970,900.00	\$3,592.33
Assignment of Land Use Agreement	\$50.00
Release	\$50.00
Additional Recording Fees	\$150.00
Title Insurance to Fidelity National Title Insurance Company	\$2,215.00
Basic Owner	\$2,565.00
Basic Owner	(\$650.00)
Access & Entry ALTA 17-O	\$50.00
REM-O Impr Land ALTA 9.2	\$250.00
Title Charges to Fidelity National Title Insurance Company	\$1,225.00



File No: 1616133CTN

Search & Exam	\$650.00
Closing Escrow Fee	\$500.00
Misc. fees, copies, overnight etc.	\$75.00

Total Charges	\$68,354.09
Gross Amount Due from Purchaser	\$1,066,354.09

Less: Credits	
Reduction for Unpaid Property Taxes	\$30,000.00
Deposit	\$60,000.00

Total Credits	\$90,000.00
Balance Due <u>From</u> Purchaser	<u>\$976,354.09</u>

File No: 1616133CTN

This Final Statement, which I have prepared, is a true and accurate account of this transaction. I have caused or will cause funds to be disbursed in accordance with this statement.

Purchaser understands that tax and insurance proration and reserves were based on figures for the preceding year or supplied by others or estimates for the current year, and in the event of any change for current year, all necessary adjustments must be made between Purchaser and Seller directly.

Funds Held in Escrow:

When the Company has funds remaining in escrow over 60 days after either close of escrow or estimated close of escrow, the Company shall impose a monthly holding fee of \$25 that is to be charged against the funds held by the Company. If a balance still exists after 6 months, all remaining funds will be escheated to the state.

Fees incurred shall be deducted from the amount held until they are disbursed or are escheated to the state. In the event the amount of the fee(s) incurred is more than the amount of the funds held in escrow, then the amount of the funds remaining in the file shall be considered payment in full of the fees due.

The undersigned hereby authorizes Fidelity National Title Insurance Company to make expenditure and disbursements as shown above and approves same for payment. The undersigned also acknowledges receipt of Loan Funds, if applicable, in the amount shown above and a receipt of a copy of this Statement.

Escrow Agent:

Purchaser:

Fidelity National Title Insurance Company

Scott County Community Hospital, Inc., a Tennessee corporation

By:

Name: Pamela B. Hampton

Title: Commercial Underwriter, A.V.P.

By:

Printed Name:

Title:

Michael G. Galt
DIRECTOR



Fidelity National Title
Insurance Company

Fidelity National Title Insurance Company
6840 Carothers Parkway, Suite 200
Franklin, TN 37067
Phone: 615-224-7400

SELLER'S FINAL STATEMENT

SETTLEMENT DATE:: January 13, 2017

ORDER NO.: 1616133CTN

PURCHASER: Scott County Community Hospital, Inc., a
Tennessee corporation
18797 Alberta Street
Oneida, TN 37841

SELLER: Pioneer Health Services of Oneida, LLC, a
Mississippi limited liability company
110 Pioneer Way
Magee, MS 39111

Pioneer Health Services of Oneida Real Estate,
LLC, a Mississippi limited liability company
100 Pioneer Way
Magee, MS 39111

PROPERTY: 18797 Alberta Street
Oneida, TN 37841-2127

Sales Price (Real Estate)	\$398,000.00
Sales Price (Hospital)	\$600,000.00
Total Sales Price	\$998,000.00
Reimbursements/Credits	
Total Reimbursements/Credits	\$0.00
Gross Amount Due to Seller	\$998,000.00

Less: Charges and Deductions	
Reduction for Unpaid Property Taxes	\$30,000.00
Deposit	\$60,000.00
2% Success Fee to Solic Capital Advisors, LLC	\$19,960.00
20% Minimum Reserve Fee to Law Offices of Craig M. Geno, PLLC	\$199,600.00
Payment per Sale Order to Siemens Financial Services, Inc.	\$15,000.00
Title Charges to Fidelity National Title Insurance Company	\$575.00
Closing Escrow Fee	\$500.00
Misc. fees, copies, overnight etc.	\$75.00
PAYOFF to First National Bank of Oneida	\$398,000.00

Total Charges and Deductions	\$723,135.00
Net Amount Due To Seller	\$274,865.00



File No: 1616133CTN

This Final Statement, which I have prepared, is a true and accurate account of this transaction. I have caused or will cause funds to be disbursed in accordance with this statement.

Seller understands that tax and insurance proration and reserves were based on figures for the preceding year or supplied by others or estimates for the current year, and in the event of any change for current year, all necessary adjustments must be made between Purchaser and Seller directly.

Funds Held in Escrow:

When the Company has funds remaining in escrow over 60 days after either close of escrow or estimated close of escrow, the Company shall impose a monthly holding fee of \$25 that is to be charged against the funds held by the Company. If a balance still exists after 6 months, all remaining funds will be escheated to the state.

Fees incurred shall be deducted from the amount held until they are disbursed or are escheated to the state. In the event the amount of the fee(s) incurred is more than the amount of the funds held in escrow, then the amount of the funds remaining in the file shall be considered payment in full of the fees due.

The undersigned hereby authorizes Fidelity National Title Insurance Company to make expenditure and disbursements as shown above and approves same for payment. The undersigned also acknowledges receipt of Loan Funds, if applicable, in the amount shown above and a receipt of a copy of this Statement.

Escrow Agent:

Fidelity National Title Insurance Company

By: *Patricia B. Hampton*
Name: Patricia B. Hampton
Title: Commercial Underwriter, A.V.P.

Seller:

Pioneer Health Services of Oneida, LLC, a Mississippi limited liability company

By: *Scott Phillips*
Printed Name: Scott Phillips
Title: Chief Restructuring officer

Pioneer Health Services of Oneida Real Estate, LLC, a Mississippi limited liability company

By: *Scott Phillips*
Printed Name: Scott Phillips
Title: Manager